

Fill in this information to identify your case:

United States Bankruptcy Court for the:

EASTERN DISTRICT OF TENNESSEE

Case number (if known)

Chapter 11

☐ Check if this an
amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/19

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Lakeway Publishers of Missouri, Inc.

2. All other names debtor used in the last 8 years
Include any assumed names, trade names and doing business as names
DBA Louisiana Press Journal
DBA Lincoln County Journal
DBA Bowling Green Times
DBA Elsberry Democrat
DBA Herman Advertiser Courier
DBA Centralia Fireside Guard
DBA The Vandalia Leader
DBA The Lake Gazette
DBA Newstime
DBA Smart Shopper
DBA Press Journal Printing
DBA Current News Journal (shuttered)

3. Debtor's federal Employer Identification Number (EIN) 14-1837526

4. Debtor's address
Principal place of business
1609 W. 1st N Street
Morristown, TN 37815
Number, Street, City, State & ZIP Code
Hamblen
County
Mailing address, if different from principal place of business
P.O. Box 625
Morristown, TN 37815
P.O. Box, Number, Street, City, State & ZIP Code
Location of principal assets, if different from principal place of business
Assets are also held at each of the publishing locations in MO. (see schedule A/B and/or Form 206)
Number, Street, City, State & ZIP Code

5. Debtor's website (URL) Multiple (see schedule A/B and/or Form 206)

6. Type of debtor
☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify:

Debtor **Lakeway Publishers of Missouri, Inc.**
Name

Case number (if known)

7. Describe debtor's business**A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?**Check one:**

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. **Check all that apply:**

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625 (amount subject to adjustment on 4/01/22 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**☒ No.☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?☐ No☒ Yes.

List all cases. If more than 1, attach a separate list

Debtor	Lakeway Publishers, Inc.	Relationship	Parent Company
District	_____	When	_____
		Case number, if known	_____

Debtor **Lakeway Publishers of Missouri, Inc.**
Name

Case number (if known)

11. Why is the case filed in this district?*Check all that apply:*

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?☐ No☒ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention?** (*Check all that apply.*)

- ☒ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? **Roof has blown in, causing hazard to people working in the building.**

- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other

Where is the property?**106 West Main Street
Bowling Green, MO, 63334-0000**

Number, Street, City, State & ZIP Code

Is the property insured?☐ No☒ Yes. Insurance agency**Strate Insurance Group**

Contact name

1750 West Andrew Johnson Highway Morristown, TN

Phone

423-587-2204**Statistical and administrative information****13. Debtor's estimation of available funds***Check one:*

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

- | | | |
|---|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input checked="" type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. Estimated Assets

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

16. Estimated liabilities

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor **Lakeway Publishers of Missouri, Inc.**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **May 31, 2019**
MM / DD / YYYY**X /s/ R. Jack Fishman**

Signature of authorized representative of debtor

R. Jack Fishman

Printed name

Title **President****18. Signature of attorney****X /s/ Ryan E. Jarrard**

Signature of attorney for debtor

Date **May 31, 2019**

MM / DD / YYYY

Ryan E. Jarrard 024525

Printed name

Quist, Fitzpatrick & Jarrard, PLLC

Firm name

**2121 First Tennessee Plaza
800 South Gay Street
Knoxville, TN 37929-9711**

Number, Street, City, State & ZIP Code

Contact phone **(865) 524-1873**Email address **rej@qcflaw.com****024525 TN**

Bar number and State

Fill in this information to identify the case:

Debtor name Lakeway Publishers of Missouri, Inc.

United States Bankruptcy Court for the: EASTERN DISTRICT OF TENNESSEE

Case number (if known) _____

☐ Check if this is an
amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☒ *Amended Schedule*
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 31, 2019

X /s/ R. Jack Fishman

Signature of individual signing on behalf of debtor

R. Jack Fishman

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Lakeway Publishers of Missouri, Inc.

United States Bankruptcy Court for the: EASTERN DISTRICT OF TENNESSEE

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>3,252,904.02</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>3,795,068.23</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>7,047,972.25</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ <u>7,487,904.53</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ <u>227,476.74</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ <u>1,490,812.25</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>9,206,193.52</u>

Fill in this information to identify the case:Debtor name Lakeway Publishers of Missouri, Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF TENNESSEE

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

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Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest**

2.	Cash on hand		\$400.00
2.	Cash on hand		\$400.00
2.	Cash on hand		\$200.00
2.	Cash on hand		\$250.00
2.	Cash on hand		\$250.00
2.	Cash on hand		\$50.00
2.	Cash on hand		\$100.00
2.	Cash on hand		\$150.00
2.	Cash on hand		\$500.00
3.	Checking, savings, money market, or financial brokerage accounts (Identify all)		
	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number
3.1.	(LPJ) The Mercantile Bank	Checking	8818
			\$3,727.17

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3.2.	(LCJ) People's Bank & Trust	Checking	0087	\$7,701.76
3.3.	(BGT) Community State Bank of Missouri	Checking	2909	\$3,848.32
3.4.	(EBD) Providence Bank	Checking	4435	\$1,251.40
3.5.	(HAC) People's Savings Bank	Checking	2172	\$5,311.41
3.6.	(CFG) Central Bank of Boone County	Checking	7350	\$3,259.28
3.7.	(VAN) Central Bank of Boone County	Checking	6263	\$13,635.96
3.8.	(TLG) Alliant Bank	Checking	5524	\$11,420.89
3.9.	(NT) First Bank	Checking	0630	\$3,585.01
3.10.	(SS) First Bank	Checking	1723	\$1,295.00
3.11.	(PJP) Mercantile Bank	Checking	8826	\$263.59

4. **Other cash equivalents (Identify all)**

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$57,599.79

Part 2: Deposits and Prepayments

6. **Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**
Description, including name of holder of deposit

7.1. **Ameren (electric utilities: to be applied to final bill)** **\$100.00**

Debtor Lakeway Publishers of Missouri, Inc. Case number (If known) _____
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7.2. Liberty Utilities \$309.00

7.3. Ameren City of Louisiana (utilities) \$125.00

7.4. City of Vandallia (sewer/water) \$100.00

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$634.00

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: 554,043.89 - 0.00 = \$554,043.89
face amount doubtful or uncollectible accounts

11b. Over 90 days old: 159,547.49 - 0.00 = \$159,547.49
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$713,591.38

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

General description

**Date of the last
physical inventory**

**Net book value of
debtor's interest
(Where available)**

**Valuation method used
for current value**

**Current value of
debtor's interest**

19. **Raw materials**

Debtor Lakeway Publishers of Missouri, Inc. Case number (If known) _____
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Newsprint, ink and supplies	04.30.2019	\$0.00	Recent cost	\$910,356.00
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20. **Work in progress**

21. **Finished goods, including goods held for resale**

22. **Other inventory or supplies**

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$910,356.00

24. **Is any of the property listed in Part 5 perishable?**

☒ No

☐ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

☒ No

☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

☐ No

☒ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

☒ No. Go to Part 7.

☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

☐ No. Go to Part 8.

☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture (BGT) Itemized list available: Furniture & Fixtures	\$0.00	N/A	\$1,200.00
(CFG) Itemized list available: Furniture & Fixtures	\$0.00	N/A	\$100.00
(EBD) Itemized list available: Furniture & Fixtures	\$0.00	N/A	\$100.00
(HAC) Itemized list available: Furniture & Fixtures	\$0.00	N/A	\$100.00
(LPJ) Itemized list available: Furniture & Fixtures	\$0.00	N/A	\$100.00

Debtor Lakeway Publishers of Missouri, Inc. Case number (If known) _____
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(TLG) Itemized list available: Furniture & Fixtures		\$0.00	N/A	\$100.00
(VAN) Itemized list available: Fixtures & Furniture		\$0.00	N/A	\$100.00
(LCJ) Itemized list available: Furniture & Fixtures		\$0.00	N/A	\$100.00
(PJP) Itemized list available: Furniture & Fixtures		\$0.00	N/A	\$900.00
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software			
(BGT) Itemized list available: Machinery & Equipment		\$0.00	N/A	\$2,063.43
(CFG) Itemized list available: Machinery & Equipment		\$0.00	N/A	\$211.52
(EBD) Itemized list available: Machinery & Equipment		\$0.00	N/A	\$1,106.31
(HAC) Itemized list available: Machinery & Equipment		\$0.00	N/A	\$57.18
(LPJ) Itemized list available: Machinery & Equipment		\$0.00	N/A	\$195.04
(NT) Itemized list available: Machinery & Equipment		\$0.00	N/A	\$50.00
(TLG) Itemized list available: Machinery & Equipment		\$0.00	N/A	\$563.89
(VAN) Itemized list available: Machinery & Equipment		\$0.00	N/A	\$50.00
(LCJ) Itemized list available: Machinery & Equipment		\$0.00	N/A	\$3,030.77
(PJP) Itemized list available: Machinery & Equipment		\$0.00	N/A	\$513,826.25

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card

Debtor Lakeway Publishers of Missouri, Inc. Case number (If known) _____
Name

collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$523,954.39

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

☐ No

☒ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

☐ No. Go to Part 9.

☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. (HAC) 2005 Ford Cargo Van *VIN & TAG#*	\$0.00	N/A	\$1,000.00
47.2. (LPJ) 2010 Chevrolet Equinox *VIN & TAG#*	\$0.00	N/A	\$1,000.00
47.3. (LCJ) 2005 Pontiac Montana Van *VIN & TAG#*	\$0.00	N/A	\$1,000.00
47.4. (PJP) 2002 Dodge 4dr. Intrepid *VIN & TAG#*	\$0.00	N/A	\$1,000.00
47.5. (PJP) 2009 Ford Cargo Van *VIN & TAG#*	\$0.00		\$1,000.00
47.6. (PJP) 2012 Hino 268A Box Truck *VIN & TAG#*	\$0.00	N/A	\$7,332.90
47.7. (PJP) 2007 GMC C-series Box Truck *VIN & TAG#*	\$0.00		\$1,000.00

48. **Watercraft, trailers, motors, and related accessories** Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

Debtor Lakeway Publishers of Missouri, Inc. Case number (If known) _____
Name

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$13,332.90

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

- ☐ No
☒ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1.	3650 W Industrial Blvd. Louisiana, MO 63353	Press Journal Printing	\$0.00	N/A	\$2,486,748.42
55.2.	20 Business Park Dr. Troy, MO 63379	Lincoln County Journal	\$0.00	N/A	\$445,393.75
55.3.	108 W State St. Vandalia, MO 63353	Vandalia Leader	\$0.00	N/A	\$18,008.22
55.4.	304 S Main St. Monroe City, MO 63456	The Lake Gazette	\$0.00	N/A	\$75,963.78
55.5.	136 E 4th St. Hermann, MO 65041	Hermann Advertiser-Courier	\$0.00	N/A	\$55,483.11
55.6.	123 Allen St. Centralia, MO 65240	Centralia Fireside Guard	\$0.00	N/A	\$30,349.16
55.7.	106 W Main St. Bowling Green, MO 63334	Bowling Green Times	\$0.00	N/A	\$25,727.64

Debtor Lakeway Publishers of Missouri, Inc. Case number (If known) _____
Name

55.8.

(LCJ) Land \$0.00 N/A \$68,000.00

55.9.

(BGT) Land \$0.00 N/A \$5,000.00

55.10

(PJP) Land \$0.00 N/A \$30,029.94

55.11

(HAC) Land \$0.00 N/A \$6,200.00

55.12

(CFG) Land \$0.00 N/A \$3,000.00

55.13

(VAN) Land \$0.00 N/A \$3,000.00

56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
Copy the total to line 88.

\$3,252,904.02

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

☐ No

☒ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

☐ No. Go to Part 11.

☒ Yes Fill in the information below.

General description

**Net book value of
debtor's interest**
(Where available)

**Valuation method used
for current value**

**Current value of
debtor's interest**

60. **Patents, copyrights, trademarks, and trade secrets**

61. **Internet domain names and websites**

Debtor Lakeway Publishers of Missouri, Inc. Case number (If known) _____

Name

Advertiser-Courier
HERMANNADVERTISERCOURIER.COM;
Bowling Green Times
BOWLINGGREENTIMES.NET; Bowling Green
Times BOWLINGGREENTIMES.COM;
Centralia Fireside Guard
FIRESIDEGUARD.COM; Elsberry Democrat
ELSBERRYDEMOCRAT.COM;
Hermann-Advertiser
RIVERVALLEYMARKETPLACE.COM;
Hermann-Advertiser HERMANNAC.COM; Lake
Gazette LAKEGAZETTE.NET; Lake Gazette
MONROECITY.NET; Lake Gazette
MARKTWAINMARKETPLACE.COM;
Lakeway Pub Missouri
BIGDEALMISSOURI.COM; Lakeway Pub
Missouri BIGDEALMO.COM; Lincoln County
Journal LINCOLNCOUNTYJOURNAL.COM;
Lincoln County Journal
TROYFREEPRESS.COM; Lincoln County
Journal
LINCOLNCOUNTYMARKETPLACE.COM;
Lincoln County Journal
LINCOLNCOUNTYMARKETPLACE.NET;
Lincoln County Journal
LINCOLNNEWSNOW.COM; Louisiana Press
Journal LOUISIANAPRESSJOURNAL.COM;
Louisiana Press Journal
PIKECOUNTYNEWS.COM; New Haven Leader
NEWHAVENLEADER.COM; Newstime
NEWSTIME-MO.COM; Newstime
STCHARLESCOMARKETPLACE.COM;
Newstime SMARTSHOPPERSTC.COM; Press
Journal Printing
PRESSJOURNALPRINTING.COM; Tri-Lake
Ledger TRILAKELEDGER.COM; Tri-Lake
Ledger TRI-LAKELEDGER.COM; Vandalia
Leader VANDALIALEADER.COM; Vandalia
Leader VANDALIALEADER.NET

Unknown

Unknown

62. Licenses, franchises, and royalties
Custom Developed Software: Universal
Subscription System; Point of Sales/CC
Processing/Reporting; Management
Report/Citrix Charts (perpetual license)

Unknown

Unknown

63. Customer lists, mailing lists, or other compilations
Our Email Marketing List contains 34,190
unique email addresses on the Missouri
mailing list; 300 unique email addresses on
Current News list

\$0.00

Unknown

Our Missouri Group Advertiser List, Missouri
Group Circulation List and our PJP Customer
List each contain unique names, addresses,
telephone numbers and email addresses for
our customers.

\$0.00

Unknown

Debtor Lakeway Publishers of Missouri, Inc. Case number (If known) _____
Name

64. **Other intangibles, or intellectual property**

65. **Goodwill**

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?)

☐ No

☒ Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

☒ No

☐ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.

☒ Yes Fill in the information below.

**Current value of
debtor's interest**

71. **Notes receivable**

Description (include name of obligor)

(BGT) 2006 Chevrolet Equinox

VIN & TAG #

SOLD 05.24.19 for \$2,500 to

employee Anita Manuel

Payroll deduction of \$32.06 over 78

pay periods eff. June 9, 2019

2,500.00 - 0.00 =
Total face amount doubtful or uncollectible amount

\$2,500.00

Great Bargains

19,573.75 - 19,573.75 =
Total face amount doubtful or uncollectible amount

\$0.00

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

Federal Income tax Return

Tax year **2018**

\$1,409,810.00

73. **Interests in insurance policies or annuities**

Jeff Guay:

Protective Life #B00426637

Face amount: \$250,000

\$44,840.59

Jeff Guay:

Protective Life #B00426247

Face amount: \$500,000

\$96,244.40

Debtor Lakeway Publishers of Missouri, Inc. Case number (If known) _____
Name

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**
Peoples Tribune
Competitor who used their facility and did not pay.
Garnishment.
Judgment entered 01.28.2019: \$25,994.15 **\$22,204.78**
Nature of claim **AR debt**
Amount requested **\$28,794.15**

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*
Miscellaneous printing supplies including but not limited to: ink/ink cartridges, plates, glue, solutions, stacks, blankets, print heads, forms and paper stock. **Unknown**

Shipping supplies including but not limited to: twine, strapping, tape, boxes, cutting tools, pens and wire spools. **Unknown**

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$1,575,599.77

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes

Debtor Lakeway Publishers of Missouri, Inc. Case number (If known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$57,599.79</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$634.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$713,591.38</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$910,356.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$523,954.39</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$13,332.90</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$3,252,904.02</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>+ \$1,575,599.77</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$3,795,068.23</u>	+ 91b. <u>\$3,252,904.02</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$7,047,972.25</u>

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if know)

Name

☒ No

☐ Yes. Specify each creditor,
including this creditor and its relative
priority.

☐ Contingent

☐ Unliquidated

☐ Disputed

2.3 Pinnacle Bank

Creditor's Name

**1111 Northshore Dr., Ste.
S-800
Knoxville, TN 37919**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Bowling Green Times

Last 4 digits of account number
5723

Do multiple creditors have an
interest in the same property?

☒ No

☐ Yes. Specify each creditor,
including this creditor and its relative
priority.

Describe debtor's property that is subject to a lien

**106 W Main St.
Bowling Green, MO 63334**

Unknown

\$25,727.64

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.4 Pinnacle Bank

Creditor's Name

**1111 Northshore Dr., Ste.
S-800
Knoxville, TN 37929**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Lincoln County Journal

Last 4 digits of account number
5723

Do multiple creditors have an
interest in the same property?

☒ No

☐ Yes. Specify each creditor,
including this creditor and its relative
priority.

Describe debtor's property that is subject to a lien

**20 Business Park Dr.
Troy, MO 63379**

Unknown

\$445,393.75

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.5 Pinnacle Bank

Creditor's Name

**1111 Northshore Dr., Ste.
S-800
Knoxville, TN 37919**

Creditor's mailing address

Creditor's email address, if known

Describe debtor's property that is subject to a lien

**136 E 4th St.
Hermann, MO 65041**

Unknown

\$55,483.11

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if know)

Name

Date debt was incurred

Hermann

Advertiser-Courier

Last 4 digits of account number

5723

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.6 Pinnacle Bank

Creditor's Name

1111 Northshore Dr., Ste. S-800

Knoxville, TN 37919

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Centralia Fireside Guard

Last 4 digits of account number

5723

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**123 Allen St.
Centralia, MO 65240**

Unknown

\$30,349.16

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.7 Pinnacle Bank

Creditor's Name

1111 Northshore Dr., Ste. S-800

Knoxville, TN 37919

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Valdalia Leader

Last 4 digits of account number

5723

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**108 W State St.
Vandalia, MO 63353**

Unknown

\$18,008.22

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.8 Pinnacle Bank

Describe debtor's property that is subject to a lien

\$1,785,000.00

\$2,486,748.42

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if know)

Creditor's Name

**1111 Northshore Dr., Ste.
S-800
Knoxville, TN 37919**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

11.16.2016

Last 4 digits of account number

2PJP

Do multiple creditors have an
interest in the same property?

☒ No

☐ Yes. Specify each creditor,
including this creditor and its relative
priority.

**3650 W Industrial Blvd.
Louisiana, MO 63353**

Describe the lien

Line of Credit

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.9 Pinnacle Bank

Creditor's Name

**1111 Northshore Dr., Ste.
S-800
Knoxville, TN 37919**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

5722

Do multiple creditors have an
interest in the same property?

☒ No

☐ Yes. Specify each creditor,
including this creditor and its relative
priority.

Describe debtor's property that is subject to a lien

AR, Inventory, CV Life Ins.

\$750,000.00

Unknown

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.1
0 Pinnacle Bank**

Creditor's Name

**1111 Northshore Dr., Ste.
S-800
Knoxville, TN 37919**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

5723

Describe debtor's property that is subject to a lien

Real Estate in TN, VA & MO

\$3,939,310.21

Unknown

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if know)

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.1
1

Pinnacle Bank

Creditor's Name

1111 Northshore Dr., Ste.

S-800

Knoxville, TN 37919

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

2001

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Equip & Bldg. PJP - commercial construction

\$954,564.68

Unknown

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$7,487,904.53

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:

Debtor name **Lakeway Publishers of Missouri, Inc.**

United States Bankruptcy Court for the: **EASTERN DISTRICT OF TENNESSEE**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	<p>Priority creditor's name and mailing address</p> <p>Internal Revenue Service P.O. Box 37941 Hartford, CT 06176-7941</p> <p>Date or dates debt was incurred 01.24.2019</p> <p>Last 4 digits of account number 7526</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Federal Payroll Taxes</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$17,298.11	\$17,298.11
2.2	<p>Priority creditor's name and mailing address</p> <p>Internal Revenue Service P.O. Box 37941 Hartford, CT 06176-7941</p> <p>Date or dates debt was incurred 02.07.2019</p> <p>Last 4 digits of account number 7526</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Federal Payroll Taxes</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$15,344.04	\$15,344.04

Debtor	Lakeway Publishers of Missouri, Inc. Name	Case number (if known)
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2.3	Priority creditor's name and mailing address Internal Revenue Service P.O. Box 37941 Hartford, CT 06176-7941	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$15,455.84	\$15,455.84
Date or dates debt was incurred 02.21.2019		Basis for the claim: Federal Payroll Taxes		
Last 4 digits of account number 7526 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address Internal Revenue Service P.O. Box 37941 Hartford, CT 06176-7941	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$15,891.20	\$15,891.20
Date or dates debt was incurred 03.07.2019		Basis for the claim: Federal Payroll Taxes		
Last 4 digits of account number 7526 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address Internal Revenue Service P.O. Box 37941 Hartford, CT 06176-7941	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$15,612.21	\$15,612.21
Date or dates debt was incurred 03.21.2019		Basis for the claim: Federal Payroll Taxes		
Last 4 digits of account number 7526 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address Internal Revenue Service P.O. Box 37941 Hartford, CT 06176-7941	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$17,555.39	\$17,555.39
Date or dates debt was incurred 04.07.2019		Basis for the claim: Federal Payroll Taxes		
Last 4 digits of account number 7526 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Lakeway Publishers of Missouri, Inc. <small>Name</small>		Case number (if known)	
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2.7	Priority creditor's name and mailing address Internal Revenue Service P.O. Box 37941 Hartford, CT 06176-7941	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$17,555.39	\$17,555.39
Date or dates debt was incurred 04.21.2019		Basis for the claim: Federal Payroll Taxes		
Last 4 digits of account number 7526 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.8	Priority creditor's name and mailing address Internal Revenue Service P.O. Box 37941 Hartford, CT 06176-7941	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$17,817.72	\$17,817.72
Date or dates debt was incurred 05.04.2019		Basis for the claim: Federal Payroll Taxes		
Last 4 digits of account number 7526 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.9	Priority creditor's name and mailing address Internal Revenue Service P.O. Box 37941 Hartford, CT 06176-7941	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$16,718.76	\$16,718.76
Date or dates debt was incurred 05.16.2019		Basis for the claim: Federal Payroll Taxes		
Last 4 digits of account number 7526 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.10	Priority creditor's name and mailing address Internal Revenue Service P.O. Box 37941 Hartford, CT 06176-7941	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,288.39	\$4,288.39
Date or dates debt was incurred 3rd & 4th Quarter 2018		Basis for the claim: FUI Deposits		
Last 4 digits of account number 7526 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Lakeway Publishers of Missouri, Inc. Name	Case number (if known)
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2.11	Priority creditor's name and mailing address Internal Revenue Service P.O. Box 37941 Hartford, CT 06176-7941	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,176.05	\$2,176.05
Date or dates debt was incurred 1st Quarter 2019		Basis for the claim: FUI Deposit		
Last 4 digits of account number 7526 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.12	Priority creditor's name and mailing address Internal Revenue Service P.O. Box 37941 Hartford, CT 06176-7941	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$17,182.67	\$17,182.67
Date or dates debt was incurred		Basis for the claim: Federal Payroll Taxes		
Last 4 digits of account number 7526 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.13	Priority creditor's name and mailing address Lincoln County Tax Collector Jessica Zumwalt 201 Main St. Troy, MO 63379	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$10,657.57	\$10,657.57
Date or dates debt was incurred		Basis for the claim: Property taxes		
Last 4 digits of account number 1005 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.14	Priority creditor's name and mailing address Missouri Department of Revenue P.O. Box 3375 Jefferson City, MO 65105-3375	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,637.00	\$1,637.00
Date or dates debt was incurred 04.07.2019		Basis for the claim: MO State Payroll Taxes		
Last 4 digits of account number 6801 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Lakeway Publishers of Missouri, Inc. Name	Case number (if known)
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2.15	Priority creditor's name and mailing address Missouri Department of Revenue P.O. Box 3375 Jefferson City, MO 65105-3375	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,637.00	\$1,637.00
Date or dates debt was incurred 04.21.2019		Basis for the claim: MO State Payroll Taxes		
Last 4 digits of account number 6801 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.16	Priority creditor's name and mailing address Missouri Department of Revenue P.O. Box 3375 Jefferson City, MO 65105-3375	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,720.00	\$1,720.00
Date or dates debt was incurred 05.04.2019		Basis for the claim: MO State Payroll Taxes		
Last 4 digits of account number 6801 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.17	Priority creditor's name and mailing address Missouri Department of Revenue P.O. Box 3375 Jefferson City, MO 65105-3375	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,530.00	\$1,530.00
Date or dates debt was incurred 05.16.2019		Basis for the claim: MO State Payroll Taxes		
Last 4 digits of account number 6801 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.18	Priority creditor's name and mailing address Missouri Department of Revenue P.O. Box 3375 Jefferson City, MO 65105-3375	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,892.53	\$3,892.53
Date or dates debt was incurred 1st Quarter 2019		Basis for the claim: SUI Deposit		
Last 4 digits of account number 6801 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.19	Priority creditor's name and mailing address Missouri Department of Revenue Taxation Bureau PO Box 840 Jefferson City, MO 65105	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: MO State Payroll Taxes Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Date or dates debt was incurred 05.30.19 Last 4 digits of account number 6801 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	\$1,613.00 \$1,613.00
2.20	Priority creditor's name and mailing address Pike County Collector 115 W Main St., #21A Bowling Green, MO 63334	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Property taxes Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Date or dates debt was incurred Last 4 digits of account number LEST Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	\$31,893.87 \$31,893.87

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		<div style="border: 1px solid black; padding: 2px; display: inline-block;">Amount of claim</div>
3.1	Nonpriority creditor's name and mailing address A&S Printing Service, Inc. P.O. Box 124 Monroe City, MO 63456 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$686.99
3.2	Nonpriority creditor's name and mailing address Abel Oil Co. P.O. Box 532 Louisiana, MO 63353 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Business expense Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown
3.3	Nonpriority creditor's name and mailing address Advertising Specialty Institute P.O. Box 15017 Wilmington, DE 19886-5017 Date(s) debt was incurred ____ Last 4 digits of account number 9119	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$175.00

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3.4	Nonpriority creditor's name and mailing address All American Publishing P.O. Box 100 Caldwell, ID 83606 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.5	Nonpriority creditor's name and mailing address Amateur Sports Promotion, USA P.O. Box 712 Quincy, IL 62306 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.6	Nonpriority creditor's name and mailing address Ameren Missouri P.O. Box 88068 Chicago, IL 60680 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.7	Nonpriority creditor's name and mailing address American Bankers Insurance Company of FL Flood Service Center P.O. Box 731178 Dallas, TX 75373-1178 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.8	Nonpriority creditor's name and mailing address AMG Parade P.O. Box 306106 Nashville, TN 37230-6106 Date(s) debt was incurred ____ Last 4 digits of account number <u>0070,0075</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12.00
3.9	Nonpriority creditor's name and mailing address Amy Twellman 3966 Hwy C Moscow Mills, MO 63362 Date(s) debt was incurred <u>05.07.2019</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> <u>Classified Ad Overpayment LCJ</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$35.00
3.10	Nonpriority creditor's name and mailing address Area Disposal 32289 Collection Center Dr. Chicago, IL 60693-0322 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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3.11	Nonpriority creditor's name and mailing address AT&T P.O. Box 5001 Carol Stream, IL 60197-5001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.12	Nonpriority creditor's name and mailing address AT&T P.O. Box 5014 Carol Stream, IL 60197-5014 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.13	Nonpriority creditor's name and mailing address AT&T P.O. Box 5019 Carol Stream, IL 60197-5019 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.14	Nonpriority creditor's name and mailing address AT&T Long Distance P.O. Box 105068 Atlanta, GA 30348-5068 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.15	Nonpriority creditor's name and mailing address AT&T Mobility P.O. Box 6463 Carol Stream, IL 60197-6463 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.16	Nonpriority creditor's name and mailing address BALCO P.O. Box 171 Elsberry, MO 63343 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.17	Nonpriority creditor's name and mailing address Bankcard Center Fuel P.O. Box 385 Memphis, TN 38101-0385 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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3.18	Nonpriority creditor's name and mailing address Bankcard Center Fuel #1 P.O. Box 1545 Memphis, TN 38101-1545 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.19	Nonpriority creditor's name and mailing address Barry's Cartoons Box 971 Hwy 2 West Whitehall, MT 59759 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.20	Nonpriority creditor's name and mailing address BCC Software, LLC P.O. Box 1174 Buffalo, NY 14240 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.21	Nonpriority creditor's name and mailing address Birch Communications P.O. Box 105066 Atlanta, GA 30348 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.22	Nonpriority creditor's name and mailing address Burnett, Dobson & Pinchak 711 Cherry St., Ste. 200 Chattanooga, TN 37402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.23	Nonpriority creditor's name and mailing address C&C Printing Controls, Inc. P.O. Box 411 Sandwich, IL 60548 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,635.30
3.24	Nonpriority creditor's name and mailing address Canon Financial Services 14904 Collections Center Dr. Chicago, IL 60693-0149 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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3.25	Nonpriority creditor's name and mailing address Carquest of Louisiana 600 Kelly Lane Louisiana, MO 63353 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.26	Nonpriority creditor's name and mailing address CDW Direct, LLC P.O. Box 75723 Chicago, IL 60675-5723 Date(s) debt was incurred _____ Last 4 digits of account number <u>0222</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,990.06
3.27	Nonpriority creditor's name and mailing address Centralia Chamber of Commerce P.O. Box 235 Centralia, MO 65240 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00
3.28	Nonpriority creditor's name and mailing address Centralia Postmaster NEED ADDRESS Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.29	Nonpriority creditor's name and mailing address Century Printing & Packaging P.O. Box 2358 Greer, SC 29652 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.30	Nonpriority creditor's name and mailing address Charter Communications P.O. Box 790086 Saint Louis, MO 63179-0086 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.31	Nonpriority creditor's name and mailing address Chick Printing Service 115 Business Hwy 61 N Bowling Green, MO 63334 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$613.52

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3.32	<p>Nonpriority creditor's name and mailing address CHS Football Centralia RVI Board Office 1399 E Hwy 22, Ste. B Centralia, MO 65240</p> <p>Date(s) debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Business expense</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	Unknown
3.33	<p>Nonpriority creditor's name and mailing address CHS Publications 849 S. Jefferson Dr. Centralia, MO 65240</p> <p>Date(s) debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$50.00
3.34	<p>Nonpriority creditor's name and mailing address City of Monroe City P.O. Box 67 Monroe City, MO 63456</p> <p>Date(s) debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Business expense</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	Unknown
3.35	<p>Nonpriority creditor's name and mailing address City of Vandalia 200 East Park Vandalia, MO 63382</p> <p>Date(s) debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Business expense</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	Unknown
3.36	<p>Nonpriority creditor's name and mailing address Clean The Uniform Co. 210 S. Cool Springs Rd. O Fallon, MO 63366</p> <p>Date(s) debt was incurred _____ Last 4 digits of account number <u>1304</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$4,002.55
3.37	<p>Nonpriority creditor's name and mailing address Columbia Daily Tribune Circulation Department 101 N. 4th St. Columbia, MO 65201</p> <p>Date(s) debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Trade debt</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$108.06
3.38	<p>Nonpriority creditor's name and mailing address Continental Products 2000 West Blvd. Mexico, MO 65265</p> <p>Date(s) debt was incurred _____ Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Business expense</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	Unknown

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3.39	Nonpriority creditor's name and mailing address Corporate Filings, LLC 30 N Gould St., Ste. 7001 Sheridan, WY 82801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.40	Nonpriority creditor's name and mailing address Creators Syndicate 737 3rd St. Hermosa Beach, CA 90254 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.41	Nonpriority creditor's name and mailing address Crown Packing Corp. P.O. Box 17806M Saint Louis, MO 63195 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.42	Nonpriority creditor's name and mailing address Cuivre River Electric Co. P.O. Box 949457 Saint Louis, MO 63195 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.43	Nonpriority creditor's name and mailing address Dayne's Waste Disposal P.O. Box 248 Mexico, MO 65265 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$106.08
3.44	Nonpriority creditor's name and mailing address Dennis Fletcher 17 Ruth Drive Monroe City, MO 63456 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$40.00
3.45	Nonpriority creditor's name and mailing address Department of Ecology P.O. Box 34050 Seattle, WA 98124-1050 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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3.46	Nonpriority creditor's name and mailing address Department of Public Safety Division of Fire Safety P.O. Box 1421 Jefferson City, MO 65102 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.47	Nonpriority creditor's name and mailing address Dish Network P.O. Box 94063 Palatine, IL 60094 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.48	Nonpriority creditor's name and mailing address Econopack, Inc. 580 Axminister Dr. Fenton, MO 63026 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$315.52
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3.49	Nonpriority creditor's name and mailing address Elsberry Hardware 214 Broadway Elsberry, MO 63343 Date(s) debt was incurred _____ Last 4 digits of account number <u>8140</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45.20
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3.50	Nonpriority creditor's name and mailing address Ennis, Inc. P.O. Box 841741 Dallas, TX 75284 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.51	Nonpriority creditor's name and mailing address Express Card & Label Co. P.O. Box 4247 Topeka, KS 66604 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.52	Nonpriority creditor's name and mailing address Faber & Brand NEED ADDRESS Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.53	Nonpriority creditor's name and mailing address Fastenal Company P.O. Box 1286 Winona, MN 55987-1286 Date(s) debt was incurred ____ Last 4 digits of account number <u>1196</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12.11
3.54	Nonpriority creditor's name and mailing address FedEx Freight Department CH P.O. Box 10306 Palatine, IL 60055-0306 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.55	Nonpriority creditor's name and mailing address Forklift of Quincy, Inc. 2426 West Schneidman Dr. Quincy, IL 62305 Date(s) debt was incurred ____ Last 4 digits of account number <u>3390</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,437.63
3.56	Nonpriority creditor's name and mailing address Franklin County Circuit Court Clerk 401 East Main St. Union, MO 63084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.57	Nonpriority creditor's name and mailing address Friends2Follow P.O. Box 526393 Salt Lake City, UT 84152-6393 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$441.00
3.58	Nonpriority creditor's name and mailing address G&V Campbell, Inc. 102 Scott Oak Rd., Ste. A Eatonton, GA 31024 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.59	Nonpriority creditor's name and mailing address Gammerler 431 Lakeview Ct., Ste. B Mount Prospect, IL 60056 Date(s) debt was incurred ____ Last 4 digits of account number <u>2187</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$503.45

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3.60	Nonpriority creditor's name and mailing address Gasconade County Circuit Court 119 E 1st Street, Room 6 Hermann, MO 65041 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.61	Nonpriority creditor's name and mailing address Gateway Truck & Refrigeration P.O. Box 843715 Kansas City, MO 64184 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.62	Nonpriority creditor's name and mailing address Getz Fire Equipment P.O. Box 419 Peoria, IL 61651 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.63	Nonpriority creditor's name and mailing address Grainger Industrial Supply Dept. 857030662 11200 E. State Route 210 Kansas City, MO 64161 Date(s) debt was incurred ____ Last 4 digits of account number <u>0662</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$214.83
3.64	Nonpriority creditor's name and mailing address Grannemann Sales & Service P.O. Box 377 Hermann, MO 65041 Date(s) debt was incurred ____ Last 4 digits of account number <u>3738</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32.42
3.65	Nonpriority creditor's name and mailing address Grant Paper Company 161 Washington St. #1150 Conshohocken, PA 19428 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.66	Nonpriority creditor's name and mailing address Havener's Termite & Insect 819 W Jackson Ave. Owensville, MO 65066 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$93.00

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3.67	Nonpriority creditor's name and mailing address Hermann Advertiser Courier 136 E 4th St. Hermann, MO 65041 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
3.68	Nonpriority creditor's name and mailing address Hermann Lumber P.O. Box 500 Hermann, MO 65041 Date(s) debt was incurred ____ Last 4 digits of account number <u>108</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$52.96
3.69	Nonpriority creditor's name and mailing address Hermann Postmaster 412 W. 16th Street Hermann, MO 65041 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.70	Nonpriority creditor's name and mailing address Hermann Utilities 1902 Jefferson Hermann, MO 65041 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.71	Nonpriority creditor's name and mailing address Higgins Electric, Inc. P.O. Box 218 Montgomery City, MO 63361 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33,608.70
3.72	Nonpriority creditor's name and mailing address Hoag & Sons' Book Bindery 145 S. Main St. Eaton Rapids, MI 48827 Date(s) debt was incurred ____ Last 4 digits of account number <u>4041</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$162.90
3.73	Nonpriority creditor's name and mailing address Hoag & Sons' Book Bindery 145 S. Main St. Eaton Rapids, MI 48827 Date(s) debt was incurred ____ Last 4 digits of account number <u>5346</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$157.67

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3.74	Nonpriority creditor's name and mailing address Indiana State Central Collection Unit P.O. Box 6219 Indianapolis, IN 46206 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.75	Nonpriority creditor's name and mailing address Jefferson County Family Support Payment Center P.O. Box 109001 Jefferson City, MO 65102 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.76	Nonpriority creditor's name and mailing address Jorson & Carlson, Inc. 1501 Pratt Blvd. Elk Grove Village, IL 60007 Date(s) debt was incurred ____ Last 4 digits of account number <u>2937</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$724.00
3.77	Nonpriority creditor's name and mailing address JS Testing, LLC 407 North Lloyd Blvd. Ewing, MO 63440 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.78	Nonpriority creditor's name and mailing address Kansa Technology 3700 Oakes Dr. Emporia, KS 66801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.79	Nonpriority creditor's name and mailing address Kinthead Pharmacy 105 S Allen Centralia, MO 65240 Date(s) debt was incurred ____ Last 4 digits of account number <u>0860</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16.19
3.80	Nonpriority creditor's name and mailing address Konica Minolta Business Solutions Dept. CH19188 Palatine, IL 60055-9188 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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3.81	Nonpriority creditor's name and mailing address Konica Minolta Premier Finance P.O. Box 105710 Atlanta, GA 30348-5710 Date(s) debt was incurred ____ Last 4 digits of account number 4750	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,379.06
3.82	Nonpriority creditor's name and mailing address Konica Minolta Premier Finance P.O. Box 41602 Philadelphia, PA 19101 Date(s) debt was incurred ____ Last 4 digits of account number 3140	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,296.84
3.83	Nonpriority creditor's name and mailing address Lacrosse Lumber 123 Main Street Louisiana, MO 63353 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.84	Nonpriority creditor's name and mailing address Liberty Utilities 75 Remittance Dr., Ste. 1741 Chicago, IL 60675 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.85	Nonpriority creditor's name and mailing address Magnets 4 Media P.O. Box 203669 Chicago, IL 60675 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.86	Nonpriority creditor's name and mailing address Mapping Solutions P.O. Box 332 Lathrop, MO 64465 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.87	Nonpriority creditor's name and mailing address Maryland State Department of Assessments & Taxation 301 W Preston St., Room 801 Baltimore, MD 21201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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3.88	Nonpriority creditor's name and mailing address McMaster Car Supply Co. P.O. Box 7690 Chicago, IL 60680-7690 Date(s) debt was incurred ____ Last 4 digits of account number 1001	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,333.93
3.89	Nonpriority creditor's name and mailing address Media Development 301 Oak, Ste. 400 Quincy, IL 62306 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.90	Nonpriority creditor's name and mailing address Meridian Waste Solutions P.O. Box 580205 Charlotte, NC 28258 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.91	Nonpriority creditor's name and mailing address Midland Paper Company 1140 Paysphere Circle Chicago, IL 60674 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.92	Nonpriority creditor's name and mailing address Midwest Bindery Repair 501 S. Whitener St. Marquand, MO 63655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.93	Nonpriority creditor's name and mailing address Millsap & Singer, LLC 612 Spirit Dr. St. Louis, MO 63005 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.94	Nonpriority creditor's name and mailing address Missouri Press Association 802 Locust St. Columbia, MO 65201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,356.98

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3.95	Nonpriority creditor's name and mailing address Missouri Press Foundation 802 Locust St. Columbia, MO 65201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,706.93
3.96	Nonpriority creditor's name and mailing address Monroe City Postmaster 416 N Main St. Monroe City, MO 63456 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.97	Nonpriority creditor's name and mailing address Mueller Martini P.O. Box 787196 Philadelphia, PA 19178-7196 Date(s) debt was incurred ____ Last 4 digits of account number <u>0800</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,356.01
3.98	Nonpriority creditor's name and mailing address Musterman Fab, Inc. 6231 Creech Lane Troy, MO 63379 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.99	Nonpriority creditor's name and mailing address National Newspaper Association 900 Community Drive Springfield, IL 62703 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.100	Nonpriority creditor's name and mailing address Navitor, Inc. P.O. Box 856740 Minneapolis, MN 55485 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.101	Nonpriority creditor's name and mailing address Neutron Industries P.O. Box 844284 Boston, MA 02284 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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3.102	Nonpriority creditor's name and mailing address Newscom Technology II NEED ADDRESS Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.103	Nonpriority creditor's name and mailing address P&P Press 6513 N. Galena Rd. Peoria, IL 61614 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.104	Nonpriority creditor's name and mailing address PAGE Cooperative P.O. Box 842228 Boston, MA 02284-2228 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,211,324.69
3.105	Nonpriority creditor's name and mailing address PandoLogic, Inc. Dept. CH 19764 Palatine, IL 60055-9764 Date(s) debt was incurred ____ Last 4 digits of account number <u>1335,2427</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$823.83
3.106	Nonpriority creditor's name and mailing address Panther Boosters 707 E Gano Chance Dr. Centralia, MO 65240 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.107	Nonpriority creditor's name and mailing address Papex, Inc. 230 Watline Ave. Mississauga Ontario L4Z 1P4 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,000.00
3.108	Nonpriority creditor's name and mailing address Pennywise P.O. Box 487 Bowie, MD 20718-0487 Date(s) debt was incurred ____ Last 4 digits of account number <u>3128</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$206.56

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3.109	Nonpriority creditor's name and mailing address Perkins Business, LLC 89 Business Hwy 61 North Bowling Green, MO 63334 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.110	Nonpriority creditor's name and mailing address Perq, LLC 7225 Georgetown Rd. Indianapolis, IN 46268 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,713.00
3.111	Nonpriority creditor's name and mailing address Pike County Circuit Court Clerk 115 West Main St. Bowling Green, MO 63334 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.112	Nonpriority creditor's name and mailing address Popmount, Inc. 1817 W Broad St. Richmond, VA 23220 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.113	Nonpriority creditor's name and mailing address Profit Packaging Newspaper Equipment P.O. Box 825 Monroe City, MO 63456 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.114	Nonpriority creditor's name and mailing address Progressive Landscaping 2702 Hwy C Centralia, MO 65240 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25.00
3.115	Nonpriority creditor's name and mailing address Protank Southwest, LLC 5907 Aldine Bender Rd. Humble, TX 77396 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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3.116	Nonpriority creditor's name and mailing address Protective Life Insurance P.O. Box 2224 Birmingham, AL 35246 Date(s) debt was incurred ____ Last 4 digits of account number 6637,6247	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,670.00
3.117	Nonpriority creditor's name and mailing address Public Water Supply of St. Charles Count P.O. Box 967 O Fallon, MO 63366 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.118	Nonpriority creditor's name and mailing address Public Works Department 202 S. 3rd Street Louisiana, MO 63353 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.119	Nonpriority creditor's name and mailing address Purvis Industries, Ltd. P.O. Box 540757 Dallas, TX 75354-0757 Date(s) debt was incurred ____ Last 4 digits of account number 5259	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14.13
3.120	Nonpriority creditor's name and mailing address Quill Corporation P.O. Box 37600 Philadelphia, PA 19101-0600 Date(s) debt was incurred ____ Last 4 digits of account number 5627,4291	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$484.83
3.121	Nonpriority creditor's name and mailing address Realmatch Dept. CH 19764 Palatine, IL 60055-9764 Date(s) debt was incurred ____ Last 4 digits of account number 1330	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.122	Nonpriority creditor's name and mailing address Realmatch Dept. CH 19764 Palatine, IL 60055-9764 Date(s) debt was incurred ____ Last 4 digits of account number 1383	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.123	Nonpriority creditor's name and mailing address Ren Potterfield Trucking 404 US Hwy 24 & 36 Monroe City, MO 63456 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.124	Nonpriority creditor's name and mailing address Richman Graphic Services 218 W Railroad Centralia, MO 65240-1324 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$221.56
3.125	Nonpriority creditor's name and mailing address Richo USA, Inc. P.O. Box 660342 Dallas, TX 75266-0342 Date(s) debt was incurred _____ Last 4 digits of account number <u>0311</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$747.84
3.126	Nonpriority creditor's name and mailing address Ritchie & Sons, Inc. 105 W Singleton St. Centralia, MO 65240 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16.26
3.127	Nonpriority creditor's name and mailing address River City Towing & Repair 903 Maryland St. Louisiana, MO 63353 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$924.83
3.128	Nonpriority creditor's name and mailing address Ron's Window Service P.O. Box 626 Moberly, MO 65270 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14.00
3.129	Nonpriority creditor's name and mailing address RR Donnelley Logistics Services P.O. Box 932721 Cleveland, OH 44193 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,191.88

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3.130	Nonpriority creditor's name and mailing address Save A Lot 225 East First Street Hermann, MO 65041 Date(s) debt was incurred ____ Last 4 digits of account number 5418	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$133.88
3.131	Nonpriority creditor's name and mailing address Schaefer Locks. LLC c/o Charles Schaefer 707 Kerri Lynn Ln. Montgomery City, MO 63361 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60.00
3.132	Nonpriority creditor's name and mailing address Schaeffer Manufacturing Co. 4729, 102 Barton St. Saint Louis, MO 63104 Date(s) debt was incurred ____ Last 4 digits of account number 7365	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$445.19
3.133	Nonpriority creditor's name and mailing address Scheidegger Service Center 514 Market St. Hermann, MO 65041 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$121.61
3.134	Nonpriority creditor's name and mailing address Schutz Transportation 3110 Cambridge Pointe Dr. Saint Louis, MO 63179 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.135	Nonpriority creditor's name and mailing address Shell Fleet P.O. Box 9001015 Louisville, KY 40290-1015 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.136	Nonpriority creditor's name and mailing address Snap Set Web Drying System, LLC 1997 S. Lipan St. Denver, CO 80223 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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3.137	Nonpriority creditor's name and mailing address Speedpro Imaging, LLC 145 Hamilton Industrial Court Wentzville, MO 63385 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.138	Nonpriority creditor's name and mailing address State Disbursement Unit P.O. Box 5400 Carol Stream, IL 60197-5400 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.139	Nonpriority creditor's name and mailing address Stevens Heating & Cooling, LLC 471 Adams St. Centralia, MO 65240 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$225.00
3.140	Nonpriority creditor's name and mailing address Stoddard Disposal Service P.O. Box 329 Mexico, MO 65265 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.141	Nonpriority creditor's name and mailing address Suburban Industrial Packaging 1519 Tower Grove Saint Louis, MO 63110 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.142	Nonpriority creditor's name and mailing address Swift Printing P.O. Box 28252 Saint Louis, MO 63132-0252 Date(s) debt was incurred ____ Last 4 digits of account number <u>3094</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$77,168.95
3.143	Nonpriority creditor's name and mailing address Tennessee Department of Revenue P.O. Box 14035 Knoxville, TN 37914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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3.144	Nonpriority creditor's name and mailing address Thomas Motors 204 N 5th St. Louisiana, MO 63353 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$825.00
3.145	Nonpriority creditor's name and mailing address Townnenews.com 1510 4th Ave. Moline, IL 61265 Date(s) debt was incurred _____ Last 4 digits of account number <u>5725,5728,5731</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,559.29
3.146	Nonpriority creditor's name and mailing address Townnenews.com 1510 4th Ave. Moline, IL 61265 Date(s) debt was incurred _____ Last 4 digits of account number <u>1896</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$310.04
3.147	Nonpriority creditor's name and mailing address Traci Ambriso-Theissen NEED ADDRESS Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.148	Nonpriority creditor's name and mailing address Troy Chamber of Commerce 850 E Cherry St., Ste. A Troy, MO 63379 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12.00
3.149	Nonpriority creditor's name and mailing address United States Treasury NEED ADDRESS Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.150	Nonpriority creditor's name and mailing address UPS Lockbox 577 Carol Stream, IL 60132-0577 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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3.151	Nonpriority creditor's name and mailing address US Office & Industrial Supply P.O. Box 7612 Van Nuys, CA 91409-7612 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$88.09
3.152	Nonpriority creditor's name and mailing address Valassis Direct Mail, Inc. 90469 Collections Center Dr. Chicago, IL 60693 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.153	Nonpriority creditor's name and mailing address Vandalia Postmaster 401 S Main St. Vandalia, MO 63382 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.154	Nonpriority creditor's name and mailing address Veritiv Operating Company f/k/a Unisource 1111 N 28th Ave. Dallas, TX 75261 Date(s) debt was incurred ____ Last 4 digits of account number <u>4999</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,993.23
3.155	Nonpriority creditor's name and mailing address Verizon Business P.O. Box 31307 Salt Lake City, UT 84130 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.156	Nonpriority creditor's name and mailing address Priority Wireless P.O. Box 25505 Lehigh Valley, PA 18002 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.157	Nonpriority creditor's name and mailing address Videojet Technologies 12113 Collection Center Dr. Chicago, IL 60693 Date(s) debt was incurred ____ Last 4 digits of account number <u>8409</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,486.44

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3.158	Nonpriority creditor's name and mailing address Web Specialties P.O. Box 2280 560 Washington St. Twin Falls, ID 83303 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.159	Nonpriority creditor's name and mailing address WebPress P.O. Box 2274 Tacoma, WA 98401 Date(s) debt was incurred _____ Last 4 digits of account number <u>1637</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,596.73
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3.160	Nonpriority creditor's name and mailing address Wells Fargo Equipment Finance Manufacturer Services Group P.O. Box 7777 San Francisco, CA 94120-7777 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.161	Nonpriority creditor's name and mailing address Wells Fargo Financial Services P.O. Box 650016 Dallas, TX 75265-0016 Date(s) debt was incurred _____ Last 4 digits of account number <u>4656</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20.26
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3.162	Nonpriority creditor's name and mailing address Whittier Mailing 13019 Park St. Santa Fe Springs, CA 90670-4005 Date(s) debt was incurred _____ Last 4 digits of account number <u>RE15</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.163	Nonpriority creditor's name and mailing address William Henry 1 Auvergne Dr. Lake Saint Louis, MO 63367 Date(s) debt was incurred <u>05.07.2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> <u>Classified Ad Overpayment LCJ</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21.67
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3.164	Nonpriority creditor's name and mailing address Wisco Envelope Co. P.O. Box 841741 Dallas, TX 75284 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business expense</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor Lakeway Publishers of Missouri, Inc. Case number (if known) _____
Name

3.165 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **Unknown**
XPO Logistics Freight, Inc.
P.O. Box 5160
Portland, OR 97208
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: Business expense
Is the claim subject to offset? ☒ No ☐ Yes

3.166 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$264.57**
ZEP Sales & Service
13237 Collection Center Dr.
Chicago, IL 60693
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number 4779
Basis for the claim: Business expense
Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part1 or Part 2 is the
related creditor (if any) listed?

Last 4 digits of
account number, if
any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts

5a. \$ **227,476.74**

5b. + \$ **1,490,812.25**

5c. \$ **1,718,288.99**

Fill in this information to identify the case:

Debtor name **Lakeway Publishers of Missouri, Inc.**

United States Bankruptcy Court for the: **EASTERN DISTRICT OF TENNESSEE**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1.	State what the contract or lease is for and the nature of the debtor's interest	Elsberry Democrat real estate lease (36 months with 1 year auto-renewal, 60 day notice to cancel, eff. 06.01.2016)	
	State the term remaining	12 months if renewed; 0 if 60 day notice given	
	List the contract number of any government contract		Balco Properties, LLC P.O. box 171 Gordon, AL 36343
2.2.	State what the contract or lease is for and the nature of the debtor's interest	2 commercial color copiers	
	State the term remaining	unknown	
	List the contract number of any government contract		Konica Minolta Premier Finance P.O. Box 41602 Philadelphia, PA 19101
2.3.	State what the contract or lease is for and the nature of the debtor's interest	1 commercial color copier	
	State the term remaining	unknown	
	List the contract number of any government contract		Konica Minolta Premier Finance P.O. Box 105710 Atlanta, GA 30348-5710
2.4.	State what the contract or lease is for and the nature of the debtor's interest	Office equipment at LCJ - copier lease (60 months eff. 01.08.2019)	
	State the term remaining	54 months	
	List the contract number of any government contract		Ricoh USA 70 Valley Stream Pkwy. Malvern, PA 19355

Debtor 1 **Lakeway Publishers of Missouri, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

Fill in this information to identify the case:

Debtor name **Lakeway Publishers of Missouri, Inc.**

United States Bankruptcy Court for the: **EASTERN DISTRICT OF TENNESSEE**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 **Lakeway Publishers, Inc.** **P.O. Box 625
Morristown, TN 37815**

A&S Printing Service, Inc.

☐ D _____
☒ E/F **3.1**
☐ G _____

2.2 **Lakeway Publishers, Inc.** **P.O. Box 625
Morristown, TN 37815**

Advertising Specialty Institute

☐ D _____
☒ E/F **3.3**
☐ G _____

2.3 **Lakeway Publishers, Inc.** **P.O. Box 625
Morristown, TN 37815**

AMG Parade

☐ D _____
☒ E/F **3.8**
☐ G _____

2.4 **Lakeway Publishers, Inc.** **P.O. Box 625
Morristown, TN 37815**

Amy Twellman

☐ D _____
☒ E/F **3.9**
☐ G _____

2.5 **Lakeway Publishers, Inc.** **P.O. Box 625
Morristown, TN 37815**

C&C Printing Controls, Inc.

☐ D _____
☒ E/F **3.23**
☐ G _____

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	CDW Direct, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.26</u> <input type="checkbox"/> G _____
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2.7	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Centralia Chamber of Commerce	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.27</u> <input type="checkbox"/> G _____
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2.8	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Chick Printing Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.31</u> <input type="checkbox"/> G _____
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2.9	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	CHS Publications	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.33</u> <input type="checkbox"/> G _____
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2.10	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Clean The Uniform Co.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.36</u> <input type="checkbox"/> G _____
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2.11	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Columbia Daily Tribune	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.37</u> <input type="checkbox"/> G _____
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2.12	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Dayne's Waste Disposal	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.43</u> <input type="checkbox"/> G _____
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2.13	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Dennis Fletcher	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.44</u> <input type="checkbox"/> G _____
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Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.14	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Econopack, Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.48</u> <input type="checkbox"/> G _____
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2.15	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Elsberry Hardware	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.49</u> <input type="checkbox"/> G _____
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2.16	Lakeway Publishers, Inc.	P.O.P. Box 625 Morristown, TN 37815	Fastenal Company	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.53</u> <input type="checkbox"/> G _____
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2.17	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Forklift of Quincy, Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.55</u> <input type="checkbox"/> G _____
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2.18	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Friends2Follow	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.57</u> <input type="checkbox"/> G _____
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2.19	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Gammerler	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.59</u> <input type="checkbox"/> G _____
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2.20	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Gasconade County Circuit Court	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.60</u> <input type="checkbox"/> G _____
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2.21	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Grainger Industrial Supply	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.63</u> <input type="checkbox"/> G _____
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Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.22	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Grannemann Sales & Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.64</u> <input type="checkbox"/> G _____
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2.23	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Havener's Termite & Insect	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.66</u> <input type="checkbox"/> G _____
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2.24	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Hermann Advertiser Courier	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.67</u> <input type="checkbox"/> G _____
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2.25	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Hermann Lumber	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.68</u> <input type="checkbox"/> G _____
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2.26	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Higgins Electric, Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.71</u> <input type="checkbox"/> G _____
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2.27	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Hoag & Sons' Book Bindery	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.72</u> <input type="checkbox"/> G _____
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2.28	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Hoag & Sons' Book Bindery	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.73</u> <input type="checkbox"/> G _____
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2.29	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Jorson & Carlson, Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.76</u> <input type="checkbox"/> G _____
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Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.30	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Kinkead Pharmacy	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.79</u> <input type="checkbox"/> G _____
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2.31	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Konica Minolta Premier Finance	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.81</u> <input type="checkbox"/> G _____
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2.32	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Konica Minolta Premier Finance	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.82</u> <input type="checkbox"/> G _____
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2.33	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	McMaster Car Supply Co.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.88</u> <input type="checkbox"/> G _____
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2.34	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Missouri Press Association	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.94</u> <input type="checkbox"/> G _____
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2.35	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Missouri Press Foundation	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.95</u> <input type="checkbox"/> G _____
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2.36	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Mueller Martini	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.97</u> <input type="checkbox"/> G _____
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2.37	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	PAGE Cooperative	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.104</u> <input type="checkbox"/> G _____
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Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.38	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	PandoLogic, Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.105</u> <input type="checkbox"/> G _____
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2.39	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Papex, Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.107</u> <input type="checkbox"/> G _____
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2.40	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Pennywise	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.108</u> <input type="checkbox"/> G _____
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2.41	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Perq, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.110</u> <input type="checkbox"/> G _____
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2.42	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Progressive Landscaping	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.114</u> <input type="checkbox"/> G _____
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2.43	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Protective Life Insurance	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.116</u> <input type="checkbox"/> G _____
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2.44	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Purvis Industries, Ltd.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.119</u> <input type="checkbox"/> G _____
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2.45	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Quill Corporation	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.120</u> <input type="checkbox"/> G _____
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Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.46 **Lakeway Publishers, Inc.** **P.O. Box 625** **Realmatch** ☐ D _____
Morristown, TN 37815 ☒ E/F 3.121
☐ G _____

2.47 **Lakeway Publishers, Inc.** **P.O. Box 625** **Realmatch** ☐ D _____
Morristown, TN 37815 ☒ E/F 3.122
☐ G _____

2.48 **Lakeway Publishers, Inc.** **P.O. Box 625** **Richman Graphic Services** ☐ D _____
Morristown, TN 37815 ☒ E/F 3.124
☐ G _____

2.49 **Lakeway Publishers, Inc.** **P.O. Box 625** **Richo USA, Inc.** ☐ D _____
Morristown, TN 37815 ☒ E/F 3.125
☐ G _____

2.50 **Lakeway Publishers, Inc.** **P.O. Box 625** **Ritchie & Sons, Inc.** ☐ D _____
Morristown, TN 37815 ☒ E/F 3.126
☐ G _____

2.51 **Lakeway Publishers, Inc.** **P.O. Box 625** **River City Towing & Repair** ☐ D _____
Morristown, TN 37815 ☒ E/F 3.127
☐ G _____

2.52 **Lakeway Publishers, Inc.** **P.O. Box 625** **Ron's Window Service** ☐ D _____
Morristown, TN 37815 ☒ E/F 3.128
☐ G _____

2.53 **Lakeway Publishers, Inc.** **P.O. Box 625** **RR Donnelley Logistics Services** ☐ D _____
Morristown, TN 37815 ☒ E/F 3.129
☐ G _____

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.54	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Save A Lot	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.130</u> <input type="checkbox"/> G _____
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2.55	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Schaefer Locks. LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.131</u> <input type="checkbox"/> G _____
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2.56	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Schaeffer Manufacturing Co.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.132</u> <input type="checkbox"/> G _____
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2.57	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Scheidegger Service Center	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.133</u> <input type="checkbox"/> G _____
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2.58	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Stevens Heating & Cooling, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.139</u> <input type="checkbox"/> G _____
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2.59	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Swift Printing	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.142</u> <input type="checkbox"/> G _____
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2.60	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Thomas Motors	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.144</u> <input type="checkbox"/> G _____
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2.61	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Townnenews.com	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.145</u> <input type="checkbox"/> G _____
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Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.62	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Townnenews.com	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.146</u> <input type="checkbox"/> G _____
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2.63	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Troy Chamber of Commerce	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.148</u> <input type="checkbox"/> G _____
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2.64	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	US Office & Industrial Supply	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.151</u> <input type="checkbox"/> G _____
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2.65	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Veritiv Operating Company	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.154</u> <input type="checkbox"/> G _____
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2.66	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Videojet Technologies	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.157</u> <input type="checkbox"/> G _____
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2.67	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	WebPress	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.159</u> <input type="checkbox"/> G _____
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2.68	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Wells Fargo Financial Services	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.161</u> <input type="checkbox"/> G _____
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2.69	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Whittier Mailing	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.162</u> <input type="checkbox"/> G _____
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Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.70	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	William Henry	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.163</u> <input type="checkbox"/> G _____
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2.71	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	ZEP Sales & Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.166</u> <input type="checkbox"/> G _____
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2.72	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Alliant Bank	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.73	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Linda Geist	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.74	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Pinnacle Bank	<input checked="" type="checkbox"/> D <u>2.3</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.75	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Pinnacle Bank	<input checked="" type="checkbox"/> D <u>2.4</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.76	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Pinnacle Bank	<input checked="" type="checkbox"/> D <u>2.5</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.77	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Pinnacle Bank	<input checked="" type="checkbox"/> D <u>2.6</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

Additional Page to List More Codebtors

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Column 1: Codebtor

Column 2: Creditor

2.78	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Pinnacle Bank	<input checked="" type="checkbox"/> D <u>2.7</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.79	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Pinnacle Bank	<input checked="" type="checkbox"/> D <u>2.8</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.80	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Pinnacle Bank	<input checked="" type="checkbox"/> D <u>2.9</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.81	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Pinnacle Bank	<input checked="" type="checkbox"/> D <u>2.10</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.82	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Pinnacle Bank	<input checked="" type="checkbox"/> D <u>2.11</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.83	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Internal Revenue Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.1</u> <input type="checkbox"/> G _____
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2.84	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Internal Revenue Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.2</u> <input type="checkbox"/> G _____
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2.85	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Internal Revenue Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.3</u> <input type="checkbox"/> G _____
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Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

Additional Page to List More Codebtors

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Column 1: Codebtor

Column 2: Creditor

2.86	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Internal Revenue Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.4</u> <input type="checkbox"/> G _____
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2.87	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Internal Revenue Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.5</u> <input type="checkbox"/> G _____
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2.88	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Internal Revenue Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.6</u> <input type="checkbox"/> G _____
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2.89	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Internal Revenue Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.7</u> <input type="checkbox"/> G _____
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2.90	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Internal Revenue Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.8</u> <input type="checkbox"/> G _____
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2.91	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Internal Revenue Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.9</u> <input type="checkbox"/> G _____
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2.92	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Internal Revenue Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.10</u> <input type="checkbox"/> G _____
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2.93	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Internal Revenue Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.11</u> <input type="checkbox"/> G _____
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Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

Additional Page to List More Codebtors

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Column 1: Codebtor

Column 2: Creditor

2.94	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Lincoln County Tax Collector	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.13</u> <input type="checkbox"/> G _____
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2.95	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Missouri Department of Revenue	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.14</u> <input type="checkbox"/> G _____
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2.96	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Missouri Department of Revenue	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.15</u> <input type="checkbox"/> G _____
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2.97	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Missouri Department of Revenue	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.16</u> <input type="checkbox"/> G _____
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2.98	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Missouri Department of Revenue	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.17</u> <input type="checkbox"/> G _____
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2.99	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Missouri Department of Revenue	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.18</u> <input type="checkbox"/> G _____
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2.10 0	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Pike County Collector	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.20</u> <input type="checkbox"/> G _____
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2.10 1	Lakeway Publishers, Inc.	P.O. Box 625 Morristown, TN 37815	Abel Oil Co.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.2</u> <input type="checkbox"/> G _____
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Debtor Lakeway Publishers of Missouri, Inc. Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.10	Lakeway	P.O. Box 625	All American	<input type="checkbox"/> D _____
2	Publishers, Inc.	Morristown, TN 37815	Publishing	<input checked="" type="checkbox"/> E/F <u>3.4</u>
				<input type="checkbox"/> G _____

2.10	Lakeway	P.O. Box 625	Amateur Sports	<input type="checkbox"/> D _____
3	Publishers, Inc.	Morristown, TN 37815	Promotion, USA	<input checked="" type="checkbox"/> E/F <u>3.5</u>
				<input type="checkbox"/> G _____

Fill in this information to identify the case:

Debtor name Lakeway Publishers of Missouri, Inc.

United States Bankruptcy Court for the: EASTERN DISTRICT OF TENNESSEE

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

For prior year:
From **11/01/2018** to **Filing Date**

Sources of revenue
Check all that apply

☒ Operating a business

☐ Other _____

Gross revenue
(before deductions and exclusions)

\$2,919,089.00

For year before that:
From **11/01/2017** to **10/31/2018**

☒ Operating a business

☐ Other _____

\$6,884,173.00

For the fiscal year:
From **11/01/2016** to **10/31/2017**

☒ Operating a business

☐ Other _____

\$6,981,663.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known) _____

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Page P.O. Box 842228 Boston, MA 02284	03.06.2019; 03.15.2019; 03.26.2019; 04.15.2019; 04.18.2019; 04.25.2019; 05.10.2019	\$238,063.97	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.2. Newscom Technology II NEED ADDRESS	03.08.2019	\$16,500.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.3. Konica-Minolta Premier Finance - 1163 P.O. Box 41602 Philadelphia, PA 19101	03.15.2019; 04.18.2019; 05.07.2019	\$59,693.86	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.4. Pinnacle Finance 1111 Northshore Dr., Ste. 130 Knoxville, TN 37921	03.05.2019; 04.05.2019; 05.06.2019	\$38,644.40	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.5. Ameren Missouri P.O. Box 88068 Chicago, IL 60680-1068	04.17.19	\$7,723.21	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.6. RR Donnelley Logistics Services P.O. Box 932721 Cleveland, OH 44193	04.18.2019	\$38,650.88	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__
3.7. Perq, LLC 7225 Georgetown Rd. Indianapolis, IN 46268	04.23.2019	\$27,288.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other__

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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☐ Pending

☐ On appeal

☒ Concluded

7.1. **Lakeway Publishers of Missouri, Inc. d/b/a Press Journal Printing v. The People's Tribune, Inc.**
18-PI-CC00036

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None
Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**
☐ None

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1.	Monroe City Police Department 300 N Main St. Monroe City, MO 63456	Calendar revenue share	12.28.2018	\$2,000.00
	Recipients relationship to debtor Customer			
9.2.	Monroe County Sheriff's Office 300 N Main St. Paris, MO 65275	Calendar revenue share	12.28.18	\$4,000.00
	Recipients relationship to debtor Customer			

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</small>	Dates of loss	Value of property lost

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Quist, Fitzpatrick & Jarrard, PLLC 2121 First Tennessee Plaza 800 South Gay Street Knoxville, TN 37929-9711	Attorney Fees	05.03.2019	\$25,000.00
	Email or website address rej@qcflaw.com			
	Who made the payment, if not debtor? Lakeway Publishers, Inc.			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1 Anita Manuel	2006 Chevy Equinox previously held by Bowling Green Times: payroll deduction of \$32.06 over 78 pay periods eff. June 9, 2019.	05.24.2019	\$2,500.00
Relationship to debtor Employee			

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
14.1. Press Journal Printing 3406 W George Street Louisiana, MO 63353	07.2002 - 02.2018
14.2. Louisiana Press Journal 3406 W George Street Louisiana, MO 63353	07.2002 - 01.2018
14.3. Newstime 11102 Veterans Memorial Parkway Lake Saint Louis, MO 63367	07.2002 - 11.2018
14.4. Lakeway MO Corporate HQ 3406 W George Street Louisiana, MO 63353	07.2002 - 02.2018

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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Debtor Lakeway Publishers of Missouri, Inc.

Case number (if known) _____

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
- ☒ Yes. State the nature of the information collected and retained.

Name, address, email address, credit card information

Does the debtor have a privacy policy about that information?

- ☒ No
- ☐ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
- ☒ Yes. Does the debtor serve as plan administrator?

☐ No Go to Part 10.☒ Yes. Fill in below:

Name of plan

USI Consulting Group

Employer identification number of the plan

EIN: 62-0754964

Has the plan been terminated?

- ☒ No
- ☐ Yes

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known) _____

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title
Case number

Court or agency name and
address

Nature of the case

Status of case

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address

Governmental unit name and
address

Environmental law, if known

Date of notice

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address

Governmental unit name and
address

Environmental law, if known

Date of notice

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Dates business existed

EIN: 62-0754964

From-To 1966 - Present

25.1. Lakeway Publishers, Inc.
P.O. Box 625
Morristown, TN 37815

Newspaper & printing

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known) _____

☐ None

Name and address		Date of service From-To
26a.1.	Crystal Beatty 609 E Page St. Vandalia, MO 63382	08.06.2008 - current
26a.2.	Patricia Blankenship P.O. Box 48 Hermann, MO 65041	09.10.2012 - current
26a.3.	Khristta Cooper 811 New Hope Rd. Elsberry, MO 63343	02.10.2016 - 04.18.2019
26a.4.	Jennifer Dowell 703 Arrow Ave. Louisiana, MO 63353	07.18.2011 - 08.27.2018
26a.5.	Susan Duncan 617 Nebraska St. Louisiana, MO 63353	11.17.2019 - 03.06.2019
26a.6.	Valerie Gilbert 3764 Shelby 209 Clarence, MO 63437	09.01.1992 - 11.02.2017
26a.7.	Rebecca Harlow 2290 Central Park Dr. Troy, MO 63379	03.21.2018 - current
26a.8.	Cynthia Kaus 189 Rue Grand Dr. Lake Saint Louis, MO 63367	11.01.2012 - 04.26.2019
26a.9.	Shannon Lenk 820 Eversmeyer Rd. Silex, MO 63377	03.18.2019 - current
26a.10.	Linda Luebrecht 19862 Pike 476 Bowling Green, MO 63334	10.01.1986 - 10.02.2018
26a.11.	Donna McManama 610 Tidball Centralia, MO 65240	07.16.2007 - current
26a.12.	Abbie Power 717 Tugboat St. Monroe City, MO 63456	10.23.2017 - current
26a.13.	Michael Short 13 Pokes Lane Elsberry, MO 63343	08.31.2000 - current
26a.14.	Cindy Viehman 47 Oxford Place Troy, MO 63379	07.20.2016 - 07.26.2017
26a.15.	Julie Wecheter 534 Tabago Lane Moscow Mills, MO 63362	08.03.2017 - 03.21.2018

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

Name and address	Date of service From-To
26a.16. Christine Watson 1011 Park St. Monroe City, MO 63456	01.03.2017 - 09.29.2017
26a.17. Christina White 745 Virginia St. Saint Clair, MO 63077	11.18.2016 - 10.27.2017
26a.18. Bridgette Worley 15722 Pike 292 Bowling Green, MO 63334	09.05.2018 - current
26a.19. Bonnie Archer-Hep 791 Hwy 113 White Pine, TN 37890	10.22.2018 - current
26a.20. Heather Baker 1169 George Byrd Rd. Morristown, TN 37813	02.28.2012 - 06.08.2018
26a.21. Morgan Biery 321 Flemings Dr. Morristown, TN 37813	06.11.2018 - 01.04.2019
26a.22. Lorie Diamond 5036 Cameron Rd. Morristown, TN 37814	12.26.2017 - current
26a.23. Carmen Gibson 5544 Buckingham Dr. Russellville, TN 37860	06.18.2018 - 02.22.2019
26a.24. April Graham 2235 Kidwell Ridge Rd. Morristown, TN 37814	04.01.2019 - 04.02.2019
26a.25. Tanya Greene 1136 Back Valley Rd. Sneedville, TN 37869	11.20.2003 - 11.23.2018
26a.26. Whittney Hickey 4687 East Hampton Blvd. Morristown, TN 37813	12.03.2018 - 04.17.2019
26a.27. Betty Howard 1021 Rhett Circle Morristown, TN 37814	05.15.1972 - current
26a.28. Lee Huguenard 110 Judge Asbury Court Jacksboro, TN 37757	01.22.1990 - 04.13.2017
26a.29. Jane Hutton 1635 Timber Ridge Rd. Greeneville, TN 37743	01.28.2015 - 12.28.2017
26a.30. Donna Johnagin 532 Big Hill Rd. Mooreburg, TN 37811	02.12.2015 - current
26a.31. Angela Jones 129 Maydawn Ln. Mooreburg, TN 37811	04.30.2007 - 05.11.2018

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

Name and address		Date of service From-To
26a.32.	Julie Malott 5393 Stuffel Rd. Morristown, TN 37814	04.30.2007 - 05.11.2018
26a.33.	Jennifer Martin 2625 Perkey Street Morristown, TN 37814	02.25.2019 - 03.18.2019
26a.34.	Carolyn McKinney 1323 Hugh Drive Morristown, TN 37814	11.09.2015 - current
26a.35.	Michelle Purkey 1104 Cross St. Erwin, TN 37650	09.28.2009 - current
26a.36.	Ashley Southerland 3092 Hardy Rd. White Pine, TN 37890	11.14.2016 - 03.22.2019
26a.37.	Tabitha Jaycox 624 Whippoorwill Dr. Talbott, TN 37877	04.29.2019 - current

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address		Date of service From-To
26b.1.	Craine, Thompson & Jones f/k/a Hiram Jones & Associates P.O. Box 1779 Morristown, TN 37816	1966 - current

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address		If any books of account and records are unavailable, explain why
26c.1.	Craine, Thompson & Jones P.O. Box 1779 Morristown, TN 37816	
26c.2.	Lorie Diamond, CFO Lakeway Publishers of Missouri P.O. Box 625 Morristown, TN 37815	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address	
26d.1.	Commercial Bank c/o Rick Sprinkle, MBA, Executive VP 710 Cumberland Gap Pkwy. Harrogate, TN 37752

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known) _____

Name and address

- 26d.2. **Hometrust Bank**
c/o David Slack, County Executive
120 Evans Avenue
Morristown, TN 37814
-
- 26d.3. **Citizens National Bank**
c/o Chris Horn, Market President,
Hamblen and Jefferson Counties
4320 Evan Greene Plaza
Morristown, TN 37813
-
- 26d.4. **Fifth Third Bank**
c/o Nathan Copeland, VP Comm. Banking
8331 E. Walker Springs Ln, Ste. 201
Knoxville, TN 37923
-
- 26d.5. **First Century Bank**
c/o Rob Barger, President/CEO
P.O. Box 1559
Tazewell, TN 37879
-
- 26d.6. **New People's Bank**
c/o J. W. Kiser, Sr. Comm. Banking
Officer, Sr. VP
101 Linden Square Drive
Bristol, VA 24202
-
- 26d.7. **SunTrust Bank**
c/o Harry Gross, Executive VP
9950 Kingston Pike
Knoxville, TN 37922
-
- 26d.8. **Community Bank Blount County**
c/o John Harris, Executive VP,
Chief Lending Officer
P.O. Box 9730
Maryville, TN 37802
-
- 26d.9. **Wells Fargo**
c/o Michael Friesch, Vice President
Commercial Banking Group
3100 West End Ave., Ste. 900
Nashville, TN 37203
-
- 26d.10. **The Joel Cohen Group, LLC**
d/b/a callcohen.com
c/o Joel Cohen, Chairman/Pres./CEO
1389 W. 86th St., Ste. 196
Indianapolis, IN 46260
-
- 26d.11. **AXIS Capital Funding** c/o Tracy Harris
Headquarters: Bermuda
92 Pitts Bay Road, AXIS House
Pembroke, HM 08
-
- 26d.12. **Lighthouse Financial Group**
c/o Al Foster, Vice President
6624 Colonial Forest Ln.
Knoxville, TN 37919
-
- 26d.13. **BB&T**
c/o DeAnna Hughes
900 S. Gay St., 24th Floor
Knoxville, TN 37902
-

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known)

Name and address

26d.14. **SMS Financial**
c/o Dan Shorr
6819 North 12th St.
Phoenix, AZ 85014

26d.15. **First Tennessee Bank**
c/o Justin Cook
1112 W. First North St.
Morristown, TN 37814

26d.16. **Pinnacle Financial Partners**
c/o Leslie Mills
1111 Northshore Dr., Ste. S800
Knoxville, TN 37921

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No☒ Yes. Give the details about the two most recent inventories.

	Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
27.1	Jeffrey Guay - GM	04.30.2019	\$910,356 - cost
	Name and address of the person who has possession of inventory records Sean Shilling - Production Manager (PJP) 550 Sandra Way Winfield, MO 63389		

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
R. Jack Fishman	1220 Wildwood Dr. Morristown, TN 37814	Chairman	7%
R. Michael Fishman	761 Berkshire Dr. Morristown, TN 37814	Secretary/Treasurer	20%
William O. Foutch	830 W First North St. Morristown, TN 37814	Asst. Secretary	0%
Jeffrey D. Fishman	600 Stuart St. Tullahoma, TN 37388	Vice President	20%
Omer Perryman	1310 Bales Dr. Morristown, TN 37814	Director	3%

Debtor **Lakeway Publishers of Missouri, Inc.**

Case number (if known) _____

Name	Address	Position and nature of any interest	% of interest, if any
Lorie Diamond	5036 Cameron Rd. Morristown, TN 37814	Director	0%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☐ No
☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held ended 12.2017
Jane Hutton	1635 Timber Ridge Rd. Greeneville, TN 37743	Director	

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No
☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	--	-------	--------------------------------

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☐ No
☒ Yes. Identify below.

Name of the pension fund	Employer Identification number of the parent corporation
USI Consulting Group	EIN: 62-0754964

Debtor Lakeway Publishers of Missouri, Inc.

Case number (if known) _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 31, 2019

/s/ R. Jack Fishman

Signature of individual signing on behalf of the debtor

R. Jack Fishman

Printed name

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

**United States Bankruptcy Court
Eastern District of Tennessee**

In re **Lakeway Publishers of Missouri, Inc.**

Debtor(s)

Case No.

Chapter

11

VERIFICATION OF CREDITOR MATRIX

The above Debtor(s) hereby verifies under the penalty of perjury under the laws of the United States of America that the attached list of creditors is true and correct to the best of his/her knowledge.

Date: **May 31, 2019**

/s/ R. Jack Fishman

R. Jack Fishman/President

Signer/Title

Date: **May 31, 2019**

/s/ Ryan E. Jarrard

Signature of Attorney

Ryan E. Jarrard 024525

Quist, Fitzpatrick & Jarrard, PLLC

2121 First Tennessee Plaza

800 South Gay Street

Knoxville, TN 37929-9711

(865) 524-1873 Fax: (865) 525-2440

A&S Printing Service, Inc.
P.O. Box 124
Monroe City, MO 63456

Abel Oil Co.
P.O. Box 532
Louisiana, MO 63353

Advertising Specialty Institute
P.O. Box 15017
Wilmington, DE 19886-5017

All American Publishing
P.O. Box 100
Caldwell, ID 83606

Alliant Bank
P.O. Box 308
Monroe City, MO 63456

Amateur Sports Promotion, USA
P.O. Box 712
Quincy, IL 62306

Ameren Missouri
P.O. Box 88068
Chicago, IL 60680

American Bankers Insurance Company of FL
Flood Service Center
P.O. Box 731178
Dallas, TX 75373-1178

AMG Parade
P.O. Box 306106
Nashville, TN 37230-6106

Amy Twellman
3966 Hwy C
Moscow Mills, MO 63362

Area Disposal
32289 Collection Center Dr.
Chicago, IL 60693-0322

AT&T
P.O. Box 5001
Carol Stream, IL 60197-5001

AT&T
P.O. Box 5014
Carol Stream, IL 60197-5014

AT&T
P.O. Box 5019
Carol Stream, IL 60197-5019

AT&T Long Distance
P.O. Box 105068
Atlanta, GA 30348-5068

AT&T Mobility
P.O. Box 6463
Carol Stream, IL 60197-6463

BALCO
P.O. Box 171
Elsberry, MO 63343

Balco Properties, LLC
P.O. box 171
Gordon, AL 36343

Bankcard Center Fuel
P.O. Box 385
Memphis, TN 38101-0385

Bankcard Center Fuel #1
P.O. Box 1545
Memphis, TN 38101-1545

Barry's Cartoons
Box 971 Hwy 2 West
Whitehall, MT 59759

BCC Software, LLC
P.O. Box 1174
Buffalo, NY 14240

Birch Communications
P.O. Box 105066
Atlanta, GA 30348

Burnett, Dobson & Pinchak
711 Cherry St., Ste. 200
Chattanooga, TN 37402

C&C Printing Controls, Inc.
P.O. Box 411
Sandwich, IL 60548

Canon Financial Services
14904 Collections Center Dr.
Chicago, IL 60693-0149

Carquest of Louisiana
600 Kelly Lane
Louisiana, MO 63353

CDW Direct, LLC
P.O. Box 75723
Chicago, IL 60675-5723

Centralia Chamber of Commerce
P.O. Box 235
Centralia, MO 65240

Centralia Postmaster
NEED ADDRESS

Century Printing & Packaging
P.O. Box 2358
Greer, SC 29652

Charter Communications
P.O. Box 790086
Saint Louis, MO 63179-0086

Chick Printing Service
115 Business Hwy 61 N
Bowling Green, MO 63334

CHS Football
Centralia RVI Board Office
1399 E Hwy 22, Ste. B
Centralia, MO 65240

CHS Publications
849 S. Jefferson Dr.
Centralia, MO 65240

City of Monroe City
P.O. Box 67
Monroe City, MO 63456

City of Vandalia
200 East Park
Vandalia, MO 63382

Clean The Uniform Co.
210 S. Cool Springs Rd.
O Fallon, MO 63366

Columbia Daily Tribune
Circulation Department
101 N. 4th St.
Columbia, MO 65201

Continental Products
2000 West Blvd.
Mexico, MO 65265

Corporate Filings, LLC
30 N Gould St., Ste. 7001
Sheridan, WY 82801

Creators Syndicate
737 3rd St.
Hermosa Beach, CA 90254

Crown Packing Corp.
P.O. Box 17806M
Saint Louis, MO 63195

Cuivre River Electric Co.
P.O. Box 949457
Saint Louis, MO 63195

Dayne's Waste Disposal
P.O. Box 248
Mexico, MO 65265

Dennis Fletcher
17 Ruth Drive
Monroe City, MO 63456

Department of Ecology
P.O. Box 34050
Seattle, WA 98124-1050

Department of Public Safety
Division of Fire Safety
P.O. Box 1421
Jefferson City, MO 65102

Dish Network
P.O. Box 94063
Palatine, IL 60094

Econopack, Inc.
580 Axminister Dr.
Fenton, MO 63026

Elsberry Hardware
214 Broadway
Elsberry, MO 63343

Ennis, Inc.
P.O. Box 841741
Dallas, TX 75284

Express Card & Label Co.
P.O. Box 4247
Topeka, KS 66604

Faber & Brand
NEED ADDRESS

Fastenal Company
P.O. Box 1286
Winona, MN 55987-1286

FedEx Freight Department CH
P.O. Box 10306
Palatine, IL 60055-0306

Forklift of Quincy, Inc.
2426 West Schneidman Dr.
Quincy, IL 62305

Franklin County Circuit Court Clerk
401 East Main St.
Union, MO 63084

Friends2Follow
P.O. Box 526393
Salt Lake City, UT 84152-6393

G&V Campbell, Inc.
102 Scott Oak Rd., Ste. A
Eatonton, GA 31024

Gammerler
431 Lakeview Ct., Ste. B
Mount Prospect, IL 60056

Gasconade County Circuit Court
119 E 1st Street, Room 6
Hermann, MO 65041

Gateway Truck & Refrigeration
P.O. Box 843715
Kansas City, MO 64184

Getz Fire Equipment
P.O. Box 419
Peoria, IL 61651

Grainger Industrial Supply
Dept. 857030662
11200 E. State Route 210
Kansas City, MO 64161

Grannemann Sales & Service
P.O. Box 377
Hermann, MO 65041

Grant Paper Company
161 Washington St. #1150
Conshohocken, PA 19428

Havener's Termite & Insect
819 W Jackson Ave.
Owensville, MO 65066

Hermann Advertiser Courier
136 E 4th St.
Hermann, MO 65041

Hermann Lumber
P.O. Box 500
Hermann, MO 65041

Hermann Postmaster
412 W. 16th Street
Hermann, MO 65041

Hermann Utilities
1902 Jefferson
Hermann, MO 65041

Higgins Electric, Inc.
P.O. Box 218
Montgomery City, MO 63361

Hoag & Sons' Book Bindery
145 S. Main St.
Eaton Rapids, MI 48827

Indiana State Central Collection Unit
P.O. Box 6219
Indianapolis, IN 46206

Internal Revenue Service
P.O. Box 37941
Hartford, CT 06176-7941

Jefferson County Family Support
Payment Center
P.O. Box 109001
Jefferson City, MO 65102

Jorson & Carlson, Inc.
1501 Pratt Blvd.
Elk Grove Village, IL 60007

JS Testing, LLC
407 North Lloyd Blvd.
Ewing, MO 63440

Kansa Technology
3700 Oakes Dr.
Emporia, KS 66801

Kinkead Pharmacy
105 S Allen
Centralia, MO 65240

Konica Minolta Business Solutions
Dept. CH19188
Palatine, IL 60055-9188

Konica Minolta Premier Finance
P.O. Box 105710
Atlanta, GA 30348-5710

Konica Minolta Premier Finance
P.O. Box 41602
Philadelphia, PA 19101

Lacrosse Lumber
123 Main Street
Louisiana, MO 63353

Lakeway Publishers, Inc.
P.O. Box 625
Morristown, TN 37815

Lakeway Publishers, Inc.
P.O.P. Box 625
Morristown, TN 37815

Liberty Utilities
75 Remittance Dr., Ste. 1741
Chicago, IL 60675

Lincoln County Tax Collector
Jessica Zumwalt
201 Main St.
Troy, MO 63379

Linda Geist
510 2nd St.
Monroe City, MO 63456

Magnets 4 Media
P.O. Box 203669
Chicago, IL 60675

Mapping Solutions
P.O. Box 332
Lathrop, MO 64465

Maryland State Department of
Assessments & Taxation
301 W Preston St., Room 801
Baltimore, MD 21201

McMaster Car Supply Co.
P.O. Box 7690
Chicago, IL 60680-7690

Media Development
301 Oak, Ste. 400
Quincy, IL 62306

Meridian Waste Solutions
P.O. Box 580205
Charlotte, NC 28258

Midland Paper Company
1140 Paysphere Circle
Chicago, IL 60674

Midwest Bindery Repair
501 S. Whitener St.
Marquand, MO 63655

Millsap & Singer, LLC
612 Spirit Dr.
St. Louis, MO 63005

Missouri Department of Revenue
P.O. Box 3375
Jefferson City, MO 65105-3375

Missouri Department of Revenue
Taxation Bureau
PO Box 840
Jefferson City, MO 65105

Missouri Press Association
802 Locust St.
Columbia, MO 65201

Missouri Press Foundation
802 Locust St.
Columbia, MO 65201

Monroe City Postmaster
416 N Main St.
Monroe City, MO 63456

Mueller Martini
P.O. Box 787196
Philadelphia, PA 19178-7196

Musterman Fab, Inc.
6231 Creech Lane
Troy, MO 63379

National Newspaper Association
900 Community Drive
Springfield, IL 62703

Navitor, Inc.
P.O. Box 856740
Minneapolis, MN 55485

Neutron Industries
P.O. Box 844284
Boston, MA 02284

Newscom Technology II
NEED ADDRESS

P&P Press
6513 N. Galena Rd.
Peoria, IL 61614

PAGE Cooperative
P.O. Box 842228
Boston, MA 02284-2228

PandoLogic, Inc.
Dept. CH 19764
Palatine, IL 60055-9764

Panther Boosters
707 E Gano Chance Dr.
Centralia, MO 65240

Papex, Inc.
230 Watline Ave.
Mississauga Ontario L4Z 1P4

Pennywise
P.O. Box 487
Bowie, MD 20718-0487

Perkins Business, LLC
89 Business Hwy 61 North
Bowling Green, MO 63334

Perq, LLC
7225 Georgetown Rd.
Indianapolis, IN 46268

Pike County Circuit Court Clerk
115 West Main St.
Bowling Green, MO 63334

Pike County Collector
115 W Main St., #21A
Bowling Green, MO 63334

Pinnacle Bank
1111 Northshore Dr., Ste. S-800
Knoxville, TN 37919

Pinnacle Bank
1111 Northshore Dr., Ste. S-800
Knoxville, TN 37929

Popmount, Inc.
1817 W Broad St.
Richmond, VA 23220

Profit Packaging Newspaper Equipment
P.O. Box 825
Monroe City, MO 63456

Progressive Landscaping
2702 Hwy C
Centralia, MO 65240

Protank Southwest, LLC
5907 Aldine Bender Rd.
Humble, TX 77396

Protective Life Insurance
P.O. Box 2224
Birmingham, AL 35246

Public Water Supply of St. Charles Count
P.O. Box 967
O Fallon, MO 63366

Public Works Department
202 S. 3rd Street
Louisiana, MO 63353

Purvis Industries, Ltd.
P.O. Box 540757
Dallas, TX 75354-0757

Quill Corporation
P.O. Box 37600
Philadelphia, PA 19101-0600

Realmatch
Dept. CH 19764
Palatine, IL 60055-9764

Ren Potterfield Trucking
404 US Hwy 24 & 36
Monroe City, MO 63456

Richman Graphic Services
218 W Railroad
Centralia, MO 65240-1324

Richo USA, Inc.
P.O. Box 660342
Dallas, TX 75266-0342

Ricoh USA
70 Valley Stream Pkwy.
Malvern, PA 19355

Ritchie & Sons, Inc.
105 W Singleton St.
Centralia, MO 65240

River City Towing & Repair
903 Maryland St.
Louisiana, MO 63353

Ron's Window Service
P.O. Box 626
Moberly, MO 65270

RR Donnelley Logistics Services
P.O. Box 932721
Cleveland, OH 44193

Save A Lot
225 East First Street
Hermann, MO 65041

Schaefer Locks. LLC
c/o Charles Schaefer
707 Kerri Lynn Ln.
Montgomery City, MO 63361

Schaeffer Manufacturing Co.
4729, 102 Barton St.
Saint Louis, MO 63104

Scheidegger Service Center
514 Market St.
Hermann, MO 65041

Schutz Transportation
3110 Cambridge Pointe Dr.
Saint Louis, MO 63179

Shell Fleet
P.O. Box 9001015
Louisville, KY 40290-1015

Snap Set Web Drying System, LLC
1997 S. Lipan St.
Denver, CO 80223

Speedpro Imaging, LLC
145 Hamilton Industrial Court
Wentzville, MO 63385

State Disbursement Unit
P.O. Box 5400
Carol Stream, IL 60197-5400

Stevens Heating & Cooling, LLC
471 Adams St.
Centralia, MO 65240

Stoddard Disposal Service
P.O. Box 329
Mexico, MO 65265

Suburban Industrial Packaging
1519 Tower Grove
Saint Louis, MO 63110

Swift Printing
P.O. Box 28252
Saint Louis, MO 63132-0252

Tennessee Department of Revenue
P.O. Box 14035
Knoxville, TN 37914

Thomas Motors
204 N 5th St.
Louisiana, MO 63353

Townnenews.com
1510 4th Ave.
Moline, IL 61265

Traci Ambriso-Theissen
NEED ADDRESS

Troy Chamber of Commerce
850 E Cherry St., Ste. A
Troy, MO 63379

United States Treasury
NEED ADDRESS

UPS
Lockbox 577
Carol Stream, IL 60132-0577

US Office & Industrial Supply
P.O. Box 7612
Van Nuys, CA 91409-7612

Valassis Direct Mail, Inc.
90469 Collections Center Dr.
Chicago, IL 60693

Vandalia Postmaster
401 S Main St.
Vandalia, MO 63382

Veritiv Operating Company
f/k/a Unisource
1111 N 28th Ave.
Dallas, TX 75261

Verizon Business
P.O. Box 31307
Salt Lake City, UT 84130

Verizon Wireless
P.O. Box 25505
Lehigh Valley, PA 18002

Videojet Technologies
12113 Collection Center Dr.
Chicago, IL 60693

Web Specialties
P.O. Box 2280
560 Washington St.
Twin Falls, ID 83303

WebPress
P.O. Box 2274
Tacoma, WA 98401

Wells Fargo Equipment Finance
Manufacturer Services Group
P.O. Box 7777
San Francisco, CA 94120-7777

Wells Fargo Financial Services
P.O. Box 650016
Dallas, TX 75265-0016

Whittier Mailing
13019 Park St.
Santa Fe Springs, CA 90670-4005

William Henry
1 Auvergne Dr.
Lake Saint Louis, MO 63367

Wisco Envelope Co.
P.O. Box 841741
Dallas, TX 75284

XPO Logistics Freight, Inc.
P.O. Box 5160
Portland, OR 97208

ZEP Sales & Service
13237 Collection Center Dr.
Chicago, IL 60693

**United States Bankruptcy Court
Eastern District of Tennessee**

In re **Lakeway Publishers of Missouri, Inc.**

Debtor(s)

Case No.

Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Lakeway Publishers of Missouri, Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

May 31, 2019

Date

/s/ Ryan E. Jarrard

Ryan E. Jarrard 024525

Signature of Attorney or Litigant

Counsel for **Lakeway Publishers of Missouri, Inc.**

Quist, Fitzpatrick & Jarrard, PLLC

2121 First Tennessee Plaza

800 South Gay Street

Knoxville, TN 37929-9711

(865) 524-1873 Fax:(865) 525-2440

rej@qcflaw.com